Subnut 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Buttom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

OIL CONSERVATION DIVISION P.O. Box 2083

Santa Fe, New Mexico 37504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

·	TOTE	IANSF	ORT OIL	AND NAT	UHAL GA	S Wall AF	l No.			
perator ANOCO PRODUCTION COMPANY					Well API No. 300452484200					
Address P.O. BOX 800, DENVER, C	OLORADO 80	201						· • · · · · · · · · · · · · · · · · · ·		
teason(s) for filing (Check proper box) lew Well tecompletion Thange in Operator Change of Operator give name	Change	in Trans	porter of: Gas Sensate X	Othe	(Please explai	in)				
d address of previous operator										
I. DESCRIPTION OF WELL AND LEASE Lease Name PAN AMERICAN FEDERAL GAS COM B 1E BASIN DAKO					ATED GAS	Kind of State, F	Lease Lease No. deral or Fee		ase No.	
Occation G	1710		From The	FNI. Line	and	60 Fee	From The _	FEL	line	
Section 31 Township	30N	Rang	ec 11W	, NN	1PM,	SAN	JUAN		County	
II. DESIGNATION OF TRANS Name of Authorized Transporter of Oil MERIDIAN OIL INC. Name of Authorized Transporter of Casing	SPORTER OF or Con	OIL A		3535 EA	s address to wh AST 30TH address to wh	STREET,	FARMING copy of this fo	GTON, CO orm is to be se	87401	
EL PASO NATURAL GAS CO If well produces oil or liquids, give location of tanks.	Unit Sec.	[Tw _i	i	P 1) BOX 1492, EL PASO, TX 79 ls gas actually connected? When ?				9978		
f this production is commingled with that f V. COMPLETION DATA	rom any other lease	or pool,	give comming	ling order aum	er:					
	Oit	Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -	Date Compl. Read	ty to Pro	d.	Total Depth			P.B.T.D.		_1	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations	<u> </u>			 			Depth Casii	ng Shoe		
				OF CAST	NC DECOE	<u> </u>	<u> </u>			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE			CEMENT	DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUE	T FOR ALLO)WAB	LE	<u> </u>			_]			
OIL WELL (Test must be after t	recovery of total vol	lune of l	oad oil and mu	st be equal to a	r exceed top at lethod (Flow, p	lowable for th	s depth or be etc.)	for full 24 ho	urs.}	
Date First New Oil Run To Tank	Date of Test			Producing in	icalisa (i icali)	·····				
Length of Test	Tubing Pressure			Casing Pres	sure	m E I	Choke Size	EIN		
Actual Prod. During Test	Oil - Bbls.			Water - Bbi	.	K.	5 19			
GAS WELL						JU				
Actual Prod. Test - MCF/D	Length of Test			Bblii. Conde	ensate/MMCF	OIL	CON:			
Testing Method (pilot, back pr.)	Tubing Pressure	(Shut-in))	Casing Pres	sure (Shut-in)	.`	DIST-s2	le .		
VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Da	OIL CONSERVATION DIVISION Date Approved					
Supature Doug W. Whaley, Staff Admin. Supervisor					By SUPERVISOR DISTRICT #3					
Printed Name June 25, 1990		า เดล-83	itle 30-4280 ione No.	Titl	e					
Date		retepn						المتبينيين	كالسويع	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.